
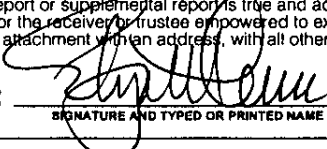


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 25, 2008 08:00 AM
Secretary of State

DOCUMENT # F93000000612		
1. Entity Name DOCKSIDE THREADING, INC.		
Principal Place of Business 789 W. PENDER ST., SUITE 1020 VANCOUVER, BRITISH COLUMBIA CANADA V6C 1H2, v6c-1h2 XX	Mailing Address 789 W. PENDER ST., SUITE 1020 VANCOUVER, BRITISH COLUMBIA CANADA V6C 1H2, v6c-1h2 XX	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent HARRISON, FRANKLIN R 304 MAGNOLIA AVENUE PANAMA CITY, FL 32401		DO NOT WRITE IN THIS SPACE
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCST DOUMET, GEORGE M 1702-2077 NELSON STREET VANCOUVER, BRITISH COLUMBIA,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DOUMET, DIMITRI 1701-2077 NELSON ST. VANCOUVER, BC	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SEARS, ELIZABETH 106-1705 NELSON ST. VANCOUVER, BC	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE:  ELIZABETH SEARS		8 Jan. 2008 604-683-9641
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #



01082008 No Chg-P CR2E034 (11/05)

4. FEI Number 94-2842141	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

U000000798171
01/30/08-80016-017 158.75

**DO NOT WRITE
IN THIS SPACE**